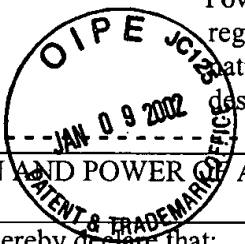


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If each inventor understands English, the Declaration and Power of Attorney below is suitable for use when filing a regular patent application and also when entering the national stage, in the case of an International application designating the USA under the PCT.



COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION	Attorney Docket No. 101216-19
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As a below named inventor, I hereby declare that:  
My residence, post office address and citizenship are as stated below next to my name,  
I believe I am the original, first and sole inventor (if only one name is listed below at 201) or an original, first and joint inventor (if plural names are listed below at 201-205) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Composition for the Treatment of Human Hair

the specification of which (check one)

☐ is attached hereto

☒ was filed on Oct. 11, 2001

under Serial Number 09/975,520 and was amended on Oct. 11, 2001  
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I list below any prior foreign application(s) for patent or inventor's certificate in respect of which foreign priority benefits are claimed under 35 USC 119; and any prior foreign application(s) for patent or inventor's certificate in respect of which such foreign priority rights are not claimed and which has a filing date before that of any application in respect of which such foreign priority benefits are claimed:

Application Number	Country	Filing Date (day, month, year)	Priority Claimed under 35 USC 119
100 50 782.4-41	Germany	13 October 2000	YES: <input checked="" type="checkbox"/> NO: <input type="checkbox"/>
			YES: <input type="checkbox"/> NO: <input type="checkbox"/>
			YES: <input type="checkbox"/> NO: <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

Application No.	Filing Date

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**Bruce S. Londa (33,531) Lorimer P. Brooks (15,155) William R. Robinson (27,224)**  
**Kurt G. Briscoe (33,141) William C. Gerstenzang (27,552) Robert A. Hyde (46,354)**  
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<b>201</b>	Family Name	First Given Name	Second Given Name
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	Post Office Address	City	State & ZIP/Country

<b>205</b>	Family Name	First Given Name	Second Given Name
	City of Residence	State or Foreign Country	Country of Citizenship
	Post Office Address	City	State & ZIP/Country
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>			
Signature of Inventor 201		<i>Bekina Fath</i>	Date 06.11.2001
Signature of Inventor 202		<i>P. Dubowj</i>	Date 1/11/2001
Signature of Inventor 203			Date
Signature of Inventor 204			Date
Signature of Inventor 205			Date